

AMENDMENTS TO THE CLAIMS

Listing of Claims

The following listing of claims replaces all previous listings or versions thereof:

1. (Currently amended) A method of treating, in a human patient, a malignant tumorous disease characterized by EpCAM expression elevated relative to healthy state of a given tissue in a human patient by comprising administering to said patient a human immunoglobulinantibody comprising an immunoglobulin heavy chain with the amino acid sequence of SEQ ID NO: 1 and an immunoglobulin light chain with the amino acid sequence of SEQ ID NO: 2, wherein said human immunoglobulinantibody specifically binds to the human EpCAM antigen and exhibits a serum half life of 15-20 days after administration to said patient, said serum half life being determined by enzyme-linked immunosorbent assay, said method comprising the step of administering said human immunoglobulin no more frequently than antibody once every one to two weeks in order to treat said malignant tumorous disease.
2. (Currently amended) The method of claim 1, further comprising:
 - (a) determining, after a period of at least one week following a respective last administration of said immunoglobulinantibody but prior to a respective next administration of said immunoglobulinantibody, the serum level of said immunoglobulinantibody still present in the blood of said patient, thereby obtaining an intermediate serum level value for said immunoglobulinantibody;
 - (b) comparing said intermediate serum level value for said immunoglobulinantibody with a predetermined serum trough level value for said immunoglobulinantibody;
 - (c) effecting the respective next administration if the intermediate serum level value for said immunoglobulinantibody is no more than 15%, preferably 10%, most preferably 5% above the serum trough level value.

3. (Currently amended) The method of claim 1, wherein the magnitude of the dose of said human immunoglobulinantibody administered is set such that, at the end of the intervening time between two respective administrations, the amount of said human immunoglobulinantibody persisting in the serum does not drop below the predetermined serum trough level.
4. (Currently amended) The method of claim 1, wherein said administering takes place once every two weeks ~~or wherein said administering takes place less frequently than once every two weeks.~~
5. (Currently amended) The method of claim 4, wherein said administering takes place once every two weeks and wherein the administered dose of said human immunoglobulinantibody remains unchanged from one administration to the next.
6. (Currently amended) The method of claim 4, wherein said administering takes place ~~less frequently than once~~ every two weeks and wherein both the administered dose of said human immunoglobulinantibody and the frequency of administration remain unchanged from one administration to the next.
7. (Previously presented) The method of claim 5, wherein the magnitude of the initial and all subsequent doses is determined by pharmacokinetic simulation.
8. (Previously presented) The method of claim 1, wherein said administering is intravenous, intraperitoneal, subcutaneous, intramuscular, topical or intradermal administration.
9. (Currently amended) The method of claim 1, wherein said malignant tumorous disease is breast cancer, epithelial cancer, hepatocellular carcinoma, cholangiocellular cancer, stomach cancer, colon cancer, prostate cancer, head and neck cancer, skin cancer (melanoma), a cancer of the urogenital tract, *e.g.*, ovarian cancer, endometrial cancer, cervix cancer, and kidney cancer; lung cancer, gastric cancer, a cancer of the small intestine, liver cancer, pancreas cancer, gall bladder cancer, a cancer of the bile duct,

esophagus cancer, a cancer of the salivatory glands or a cancer of the thyroid gland.

10. (Withdrawn) The method of claim 9, wherein said tumorous disease is prostate cancer or breast cancer and said human immunoglobulin is administered in a dosage of 1 to 7 mg per kg body weight once every two weeks.

11. (Withdrawn) The method of claim 10, wherein said human immunoglobulin is administered in a dosage of 2 to 6 mg per kg body weight once every two weeks.

12-17. (Canceled)

18. (Currently amended) The method of claim 1, wherein said human immunoglobulinantibody is formulated for administration ~~no more frequently than once~~ every two weeks.

19. (Currently amended) The method of claim 1, wherein said human immunoglobulinantibody is formulated for administration every two weeks and, the administered dose of said human immunoglobulinantibody remaining unchanged from one administration to the next.

20. (Currently amended) The method of claim 1, wherein said human immunoglobulinantibody is formulated for administration ~~less frequently than once~~ every two weeks, the administered dose of said human immunoglobulinantibody administered being set such that, at the end of the intervening time between two respective administrations, the amount of said human immunoglobulinantibody persisting in the serum does not drop below a serum trough level determined to be necessary for therapeutic efficacy.

21-22. (Canceled)

23. (Previously presented) The method of claim 2, further comprising repeating steps (a) and (b) prior to step (c).
24. (Currently amended) The method of claim 6, wherein the magnitude of the initial and all subsequent doses is determined ~~to be~~by pharmacokinetic stimulation.
25. (Withdrawn) The method of claim 22, wherein the cancer of the urogenital tract is ovarian cancer, endometrial cancer, or cervix cancer.
- 26-27. (Canceled)